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**FACSIMILE TRANSMISSION****CONFIDENTIAL**

DATE: July 18, 2006

CLIENT-MATTER No.: 21673-04480

**To:**

| NAME  | FAX No.      | PHONE No. |
|-------|--------------|-----------|
| USPTO | 571-273-8300 |           |

FROM: Laura A. Majerus

PHONE: (650) 335-7152

SENT BY: Dana Chevalier

PHONE: (650) 943-5363

NUMBER OF PAGES WITH COVER PAGE: 13 ORIGINAL WILL NOT FOLLOW

**MESSAGE:**

Please see attached.

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|   |                      |                         |             |
|---|----------------------|-------------------------|-------------|
| <b>TRANSMITTAL FORM</b><br>(to be used for all correspondence during pendency of filed application) | Application Number   | 09/648,408              |             |
|   | Issue Date           | August 24, 2000         |             |
|   | First Named Inventor | Beerud D. Sheth         |             |
|   | Group Art Unit       | 3621                    |             |
|   | Examiner Name        | Mary Da zhi Wang Cheung |             |
| Total Number of Pages in This Submission  | 2                    | Attorney Docket Number  | 21673-04480 |

| ENCLOSURES (check all that apply)   |  |
|---|--|
| <input type="checkbox"/> Fee Transmittal Form (in duplicate)<br><input type="checkbox"/> Check Enclosed                           | <input type="checkbox"/> Issue Fee Transmittal   |
| <input type="checkbox"/> Return Receipt Postcard  | <input type="checkbox"/> Letter to Chief Draftsperson  |
| <input type="checkbox"/> Response to Notice to File Missing Parts   | <input type="checkbox"/> Formal Drawing(s):<br>[ ] Sheet(s) of Figure(s) [ ]                             |
| <input type="checkbox"/> Assignment & Recordation Cover Sheet   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences                      |
| <input type="checkbox"/> Declaration  | <input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief)            |
| <input type="checkbox"/> Power of Attorney  | <input type="checkbox"/> Certified Copy of Priority Document(s)  |
| <input type="checkbox"/> Application Data Sheet   | <input type="checkbox"/> After Allowance Communication to Group  |
| <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A<br><input type="checkbox"/> Copies of IDS Cited References | <input checked="" type="checkbox"/> Request to Withdraw as Attorney and Change of Correspondence Address |
| <input type="checkbox"/> Request for Corrected Filing Receipt   | <input type="checkbox"/> _____   |
| <input type="checkbox"/> Request for Correction of Recorded Assignment  | <input type="checkbox"/> _____   |
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| <input type="checkbox"/> Status Request   | <input type="checkbox"/> _____   |
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| REMARKS:  |  |

| SIGNATURE OF ATTORNEY OR AGENT |                                   |                      |
|--------------------------------|-----------------------------------|----------------------|
| Signature:                     | <i>Laura Majerus</i>              |                      |
| Attorney/Reg. No.:             | Laura A. Majerus, Reg. No. 33,417 | Dated: July 18, 2006 |

| CERTIFICATE OF FACSIMILE TRANSMISSION  |                      |                      |
|--|----------------------|----------------------|
| I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below. |                      |                      |
| Signature:   | <i>Laura Majerus</i> |                      |
| Typed or Printed Name:   | Laura A. Majerus     | Dated: July 18, 2006 |
| Facsimile Number:  | 571-273-8300         |                      |

21673/04480/DOCS/1640540.1

JUL 18 2006

**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

|                        |                         |
|------------------------|-------------------------|
| Application Number     | 09/648,408              |
| Filing Date            | August 24, 2000         |
| First Named Inventor   | Beerud D. Sheth         |
| Group Art Unit         | 3621                    |
| Examiner Name          | Mary Da zhi Wang Cheung |
| Attorney Docket Number | 21673-04480             |

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified patent application. The client has been duly notified of this request for withdrawal and provided with all papers and property to which the client is entitled.

The reasons for this request are:

**The client knowingly and freely assents to termination of the employment.**

1. ☐ The correspondence address is NOT affected by this withdrawal.  
2. ☒ Change the correspondence address and direct all future correspondence to:

|                         |   |       |              |     |       |
|-------------------------|---|-------|--------------|-----|-------|
| Firm or Individual Name | Thomas B. Haverstock<br>Haverstock and Owens, LLP |       |              |     |       |
| Address                 | 162 North Wolfe Road                              |       |              |     |       |
| Address                 |   |       |              |     |       |
| City                    | Sunnyvale   | State | CA           | Zip | 94086 |
| Country                 | USA   |       |              |     |       |
| Telephone               | 408-530-9700                                      | Fax   | 408-530-9797 |     |       |

- ☒ This request is made on behalf of myself and  
☐ all the attorneys/agents of record,  
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
☒ the attorneys/agents associated with Customer Number 00758  
on whose behalf I have signed this request and on whose behalf I am authorized to sign.

Name Laura A. Majerus, Reg. No. 33,417

Signature *Laura Majerus*

Date *July 18/2006*

NOTE: Withdrawal is effective when approved rather than when received.  
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

21673/04480/DOCS/1637866.1